



UNC
HEALTH CARE

well

LEADING. TEACHING. CARING. | SPRING 2011



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PHOTO: KAITLIN ROGERS FOR TAMARA LACKEY PHOTOGRAPHY

Stroke Survivors Share Their Stories

When we hear about stroke and how to avoid it, how many of us don't really pay attention because we think of stroke as something that only affects older people? The truth is that young people can be at risk of having a stroke and not even know it.

We have highlighted people in this issue who experienced a stroke at a young age, including one of our own vice presidents at UNC Health Care.



Joy Phillips Murphy and Philip Austin volunteer in the Stroke Peer Mentor program.

They have chosen to share their stories of diagnosis through recovery to help others.

Through their experiences, we hope you will see that patients don't have to fear some of the devastating, lasting effects that are often associated with strokes. Many people are able to return to work, even in high-level positions, and live full and rewarding lives—with a greater appreciation for the fragility of life and for those around them. We hope you, too, will be inspired by their stories.

We have heard many great comments about the new magazine format, and we really appreciate those of you who have taken the time to

e-mail and call us. We are also thrilled that so many of you have chosen to sign up for our free subscription. We welcome all of your feedback and would love to know what you would like to see in future issues.

Kind regards,
Well editorial team
UNC Health Care

Keep the Comments Coming!

Let us know what you think of *Well* magazine. Send your comments or questions to Jennifer Breedlove at publications@unch.unc.edu.

On the Cover: Photo courtesy of Kaitlin Rogers for Tamara Lackey Photography.

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Send correspondence and address changes via e-mail, publications@unch.unc.edu; mail, *Well*, Public Affairs and Marketing, 1101 Weaver Dairy Road, Suite 100, Chapel Hill, NC 27514; phone, (919) 843-8922; Web, www.unchealthcare.org.



UNC
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PHOTO: BRIAN STRICKLAND



New ORs Open for Outpatient Surgery

The UNC Ambulatory Surgery Center (ASC) has doubled the size of its perioperative department, adding four new operating rooms and a short-stay unit for patients who need to be monitored overnight but do not need to be admitted to the hospital.

"UNC Health Care can be justly proud that we now have eight new, state-of-the-art ambulatory ORs," says Stanley Mandel, MD, medical director of UNC Hospitals operating rooms. "Patients will benefit from excellent, friendly and efficient staff and, if needed, the ability to stay overnight with a family member in our extended-stay unit."

The ASC provides outpatient specialty care for approximately 8,000 patients each year. Specialties include orthopedics, ophthalmology, gynecology, plastic surgery, ENT, pediatric urology, GI and oncology.

"The vision of our leadership has prepared us in a superb manner for the challenges of providing health care in the future," Dr. Mandel adds.

The ASC is on the first floor of the Ambulatory Care Clinics building at 102 Mason Farm Road.

America's Top Doctors at UNC Hospitals

Fifty-nine physicians at the University of North Carolina Hospitals are included in the latest list of *America's Top Doctors* by Castle Connolly Medical, which is a national health care research and publishing company.

The doctors were chosen by their peers, based primarily for their excellence in patient care. Survey respondents were asked to nominate peer physicians to whom they would send members of their family.

A physician-led team of researchers selects top doctors each year by using mail surveys, telephone surveys and electronic ballots. The criteria used to determine physician eligibility include professional qualifications, education, professional reputation and experience.



More Honors for UNC Health Care Doctors

In addition, 242 UNC Health Care physicians are included in the latest list of Best Doctors in America, and more than 200 are named in *Business North Carolina Magazine's* annual compilation of the best doctors in North Carolina. For details, visit news.unchealthcare.org.



UNC Physician Leads World Heart Federation

Sidney Smith, MD, professor of medicine/cardiology, began serving a two-year term as president of the World Heart Federation (WHF) in January 2011. The WHF, based in Geneva, is a nongovernmental organization focused on coordinating the programs of its 204 member cardiovascular societies and foundations worldwide in the global fight against heart disease and stroke, with an emphasis on low- and middle-income countries. The American Heart Association and the American College of Cardiology are member organizations representing the United States.

Dr. Smith's tenure as president will include presiding at the 2012 WHF World Congress



Sidney Smith, MD

of Cardiology in Dubai, United Arab Emirates. The WHF held its last Congress in 2010 in Beijing, China. One of Dr. Smith's major goals for the WHF is to bring cardiovascular disease to the forefront of the global health agenda through a partnership with the Non-Communicable Disease Alliance. He will also attend a United Nations summit in September 2011 to discuss the global problem of cardiovascular disease. In addition, major programs in international guidelines have been initiated.

While serving as president, Dr. Smith will continue to be clinically active, working at UNC Health Care as an attending physician and seeing his regular patients.

A Crash Course in Car Safety

Mock accident helps drive message home.

TIM FREER CONTRIBUTED TO THIS ARTICLE.



The message can get lost unless the presentation is **powerful** enough to get a teen's attention.

Motor vehicle crashes are the leading cause of death for U.S. teens, according to the National Highway Traffic Safety Administration, and drivers between the ages of 15 and 20 have the highest rate of fatal crashes of any age group. UNC Carolina Air Care is working to change that statistic in North Carolina.

RN, CFRN, EMT, clinical nurse and hospital liaison for UNC Carolina Air Care, is one of the Air Care members who visit high schools to talk to students about driving safety. The initial focus of the program was drunk driving, but it has expanded over the years to address other issues while driving, such as texting, speeding and drowsiness.

Talking to teens is a start, but sometimes the message can get lost unless the presentation is powerful enough to get their attention. Air Care's safe-driving presentations aim to do just that—with realistic and graphic mock car crashes that include students who help stage the accidents by being stand-in injured victims.

"Our goal is to make sure that teenagers understand not only the consequences of unsafe driving," McGrath says, "but also how long it can take before someone gets out there to help them."

During the demonstrations, students watch in real time how the scene of an accident is handled by the police, fire department and emergency medical teams.

The firefighters extricate victims from mangled

cars, the police officers handcuff and "arrest"

the student portraying the drunk driver, and the emergency medical team arrives

on the Air Care helicopter to pick up the patients.

The entirety of the mock crash is narrated so that students can easily follow what is going on. They can even hear the radio transmissions from the helicopter as it flies in and lands. Seeing everything happen in real time helps drive home the point that crashes like that really can happen to the students or the people they know.

Abriana Pastrana, a student from East Chapel Hill High School, played the drunk driver in a mock crash. "I couldn't even imagine being in that situation," she says, "but I thought it was a really good learning experience."

McGrath believes that mock crashes do, indeed, teach young drivers about the consequences of reckless driving. In his view, seeing it, hearing it and even experiencing it are certain to leave a lasting impression on these kids. "When teenagers have a perception of punishment for a given behavior," he says, "they're less likely to do it."

Drivers ages **15 to 20** have the highest rate of fatal crashes of any age group.

UNC Air Care transports critically ill patients to the hospital from accident sites. The helicopters are equipped with everything an ambulance has, including cardiac monitoring, oxygen and a ventilator, and have specialized teams for adult and pediatric patients. Along with the pilot, each flight has a flight nurse and a flight paramedic or flight respiratory therapist.

Having seen the devastating effects of car accidents and the number of teens affected, the Air Care team designed a program to help teens understand the risks of driving and, hopefully, prevent future accidents. Chris McGrath,



Air Care's program now warns against **texting** while driving and drowsy driving.



Six-year-old Christian of Fayetteville, N.C., has scoliosis and kyphosis and is well-known at N.C. Children's Hospital. He has endured seven surgeries in one year to correct a misaligned spine and faces more to come. Read his full story at bit.ly/meet-christian.

With that philosophy in mind, Dr. Adamson and the Pediatric Surgery Department have made some changes that will help them extend their mission of caring for the children of North Carolina. Already, N.C. Children's Hospital is one of the leading centers in the Southeast for pediatric surgery, with more children having surgery there than anywhere else in the state.

The main change involves adding more dedicated pediatric operating rooms, meaning they will only be used for children's surgeries and will have the specialized, smaller equipment needed for kids.

"We're consolidating what we were already doing," Dr. Adamson says. "We will have a fully integrated, kid-focused, family-friendly unit, and all of the staff will be just committed to kids." The caregivers have always been fully trained in pediatric care, but they were also trained in adult patient care. Now they will just focus on the special needs of children.

While a lot of the changes are happening behind the scenes, there are also changes that patients and their families will notice. Grants from the N.C. Children's Promise have made it possible to paint the unit with more kid-friendly signage and murals, and to create a video that shows children what they will see on the day they come into the OR.

"The video will help them become familiar with things they will see, such as staff in medical masks," Dr. Adamson says. "They will have a better idea of what to expect, and it gives them the opportunity to ask questions beforehand."

All of these changes are designed to help children feel less anxious about their trip to the hospital. Small details like that can really help, Dr. Adamson says.

"The new structure of the OR gives us the capacity to deal with kids," he adds, "and give them what they need when they need it." ■

Little Patients Require Special Care

Surgery department renews its commitment to treating children.

WHEN A CHILD IS SICK, PARENTS WANT TO know that he or she is getting the best care possible, and part of that is understanding the different needs that children have in the hospital. Not only do they need kid-friendly rooms and especially compassionate people who can help ease their fears, but they also need smaller, specialized equipment, particularly during surgery. "To get from mom in the holding area to being asleep in the operating room is a pretty anxious thing for kids," says William Adamson, MD, assistant professor in pediatric surgery at the UNC School of Medicine. "You approach surgery for a 5-year-old very differently than for an adult."

Did You Know?

N.C. Children's Hospital is one of the few hospitals in the region that provides care in every pediatric surgical subspecialty.

Surgeons at N.C. Children's Hospital perform more operations on children younger than 1 than any other hospital in the state.

Thirty percent of all operations at N.C. Children's Hospital are performed with minimally invasive techniques, such as laparoscopy.



Supporting Employees

► To further expand UNC Health Care's work in the community, it created the Employee Ambassador Program, which is designed to help foster its employees' volunteer efforts in their local communities. As Ambassadors, employees are eligible to earn a one-time donation of up to \$250 for qualified 501(c)(3) organizations by volunteering 50 or more hours to one organization within a year.

The energy and enthusiasm of Employee Ambassadors greatly surpassed expectations, leading to more than 4,000 volunteer hours expended for more than 60 charities in FY2010.

2010 Community Benefit Summary

Here are a few highlights of the programs and benefits UNC Health Care provides throughout North Carolina.



The University of North Carolina Health Care System
2010 COMMUNITY BENEFIT SUMMARY



Download the Full Report

To see the full 2010 Community Benefit Report, as well as the Annual Report, visit www.unhealthcare.org and click "About Us," then "Annual Reports."



UNC Health Care's Impact Across North Carolina

► UNC Health Care created an interactive map at www.unhealthcare.org/countydata to help North Carolinians track the impact of the health care system on communities across the state. UNC Health Care

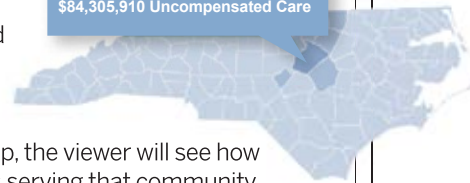
data have been incorporated into an easy-to-read, pop-up format that lets viewers quickly find information about a specific county.

By scrolling over a county on the map, the viewer will see how UNC Health Care is serving that community. Information available for each county includes:

- The number of employees who live in the county
- The number of residents who have been treated at UNC Health Care facilities
- The value of uncompensated care provided to patients from the county
- The number of UNC School of Medicine alumni currently residing in the county

Wake

419 Alumni
1,600 Employees
37,961 Patients
\$84,305,910 Uncompensated Care



Helping Students

► Connecting with middle and high school students interested in careers in health care is an important part of UNC Health Care's community outreach activities. Employees have the opportunity to participate in a number of events throughout the year. Other examples of supporting students include:

- The UNC Hospitals' Volunteer Association hosted more than 200 high school students, educators and counselors from across North Carolina at their annual Health Careers Symposium.
- UNC Health Care participated in a career fair for middle and high school students with Chapel Hill-Carrboro and Orange County schools.



To view student support videos, visit www.youtube.com/unmedicine and search "Health Careers Symposium," "Career Fair" and "Science of the ER."



PHOTO: TOM FULDNER

Putting the Care in Health Care

Excellent customer service at a hospital? Yes.

By Joshua P. Cohen

RECENTLY, MY NEWBORN SON was admitted to N.C. Children's Hospital for respiratory syncytial virus (RSV) and bronchiolitis. Thankfully, we brought him home healthy after a six-night stay. We also brought home an overwhelmingly positive view of our experiences with everyone encountered at N.C. Children's Hospital.

Specifically, we appreciated the excellent customer service. A focus on customer service? At a hospital? We were surprised, too.

'Anything Else I Can Do?'

You would think a hospital wouldn't need to have good customer service. After all, most hospitals don't face significant competition for some of their specialized services. And the very nature of a hospital means that there are many stressful, rushed situations that are not conducive to the finer points of customer service.

But excellent customer service is exactly what we received. It was simple as this: Every single person on the sixth floor of N.C. Children's Hospital, from our nurses to the doctors to the housekeeping staff, was courteous and friendly, and asked us, "Is there anything else I can do for you?"

As a businessperson, I am fascinated by how such a simple question could be so ingrained in all of the people at the hospital—especially given their many disparate roles—so that it was asked, without fail, every time someone left our room. If it hadn't been so genuine, it would have been spooky. And it even carried over after we were discharged when a nurse followed up with us to see how our son was doing the day after we got home.

Living Out the Mission

The people at UNC Health Care have internalized their mission of Leading. Teaching. Caring. With another world-class hospital 10 miles down the road, perhaps UNC thinks they need



First-rate customer service keeps Joshua P. Cohen coming back to UNC Health Care.

to compete on customer service. There's probably not that much difference in the facilities and services that are available. It's easy to provide the high-tech items that patients and families desire. It's harder to provide the high-touch items.

Even if UNC Health Care wasn't in a competitive environment, the way UNC treats its customers is the right thing to do. It makes families who are already tense and scared feel welcomed and cared for.

Whether this successful strategy is due to good management of employees, good identification and selection of employees that fit with their mission, or both, it's clear that UNC's strategy is working because my wife and I chose UNC for our son's care for this infection precisely because of the positive experiences we had there during the births of our two children. Most of the time, missions are created and quickly forgotten. But UNC shows consistency between its mission and its actions. And all of its patients benefit. ■

Joshua P. Cohen (UNC class of 1999) lives in Durham with wife Sarah (UNC Class of 2000), daughter Ella, and son Dashiell. He manages business development for TransLoc, a tech start-up in Raleigh. Despite attending Duke for graduate school, Josh and his family are Tar Heel fans. This account was adapted from a post on Josh's blog at www.joshuapcohen.com.

LESSONS LEARNED

Karen McCall didn't know much about stroke before she had one. Now she's getting the message out. BY KIKI THOMPSON

ON AVERAGE, every 40 seconds someone in the United States has a stroke.

It's a startling statistic by the American Heart Association, but it is less scary when we understand more about strokes, who is affected, and what treatment is available today to help patients in their recovery.

One common misperception about stroke is that it only strikes the elderly. Research does show that a higher number of stroke patients are older than 60, but that is not always the case.

In 2004, Karen McCall, vice president of public affairs and marketing at UNC Health Care, was on a family vacation. She was young, healthy and in good physical condition. There was no reason to suspect that she was at risk for having a stroke.

She had just finished eating a piece of double-chocolate-fudge brownie when she experienced a visual migraine—a condition she had dealt with for 20 years. This particular

episode was unusual, though. While the migraine went away after 15 minutes, as it always did, it left a lingering vision problem that Karen had never experienced before.

Being on vacation with her family and not wanting to disrupt their time together, Karen decided to wait and see how she felt after coming home a few days later. She spoke to the hospital chief of staff about the unusual episode, and he strongly advised her to visit the neurology clinic that day.

An MRI and other tests confirmed that Karen had three mini strokes during the previous two weeks.

"I cannot tell you how shocked I was," says Karen. "I was in good health, exercised every day, had low blood pressure, and had worked in the health care field for most of my career."

The stories of patients like Karen who have strokes at relatively young ages are good reminders that stroke can happen at any age. "It is true that age is a risk factor for stroke," says Ana Felix, MD, assistant professor in the Department of Neurology at the UNC School of Medicine, "but it is also true that stroke is starting to affect people at a younger age. Recent research shows that younger women, in particular, are being affected, and we're not sure why."



Resources at Your Fingertips

For more information about the risk factors of stroke, visit UNC Health Care's online health library. Go to www.unhealthcare.org and search for "stroke."



Health in Motion

Karen McCall, vice president of public affairs and marketing for UNC Health Care, rides her bike five miles to work on a regular basis. She and her husband, Neal, are avid cyclists and often ride together on their tandem bike.

PHOTO: BRIANA BROUGH

PATIENT TO PATIENT:

Someone Who Really Understands

WITH ANY ILLNESS, family and friends can be loving and compassionate, but they can never truly understand what a patient is thinking and feeling unless they also have experienced the same illness. That is the idea behind the Stroke Peer Mentor Volunteer Program at UNC Health Care.

By listening to patients and family members talk about their concerns and questions, peer mentors help them to make sense of what they are experiencing and what they may be able to expect in the upcoming months and years.

The Stroke Peer Mentor program was established in 2006. Stroke survivor Joy Phillips Murphy advocated for the development of the program, working with neuropsychologist Karla Thompson, PhD, and was the first peer mentor.

"Serving as a stroke peer mentor has given me the unique opportunity to share my experiences as a 28-year stroke survivor," says Joy. "I have done my best to convey the message of hope to the stroke survivors and their families with whom I have mentored over the years."

Philip Austin is another survivor who completed his rehabilitation at UNC after his stroke in 2005. "Having the chance to help other people day in and day out has been more rewarding to me than I could ever communicate," says Philip, who began volunteering less than a year after he was treated

at UNC Health Care and now volunteers five days a week with the rehabilitation center. "I know what it's like to push the reset button on your life and how scary that can be," says Philip, "but I'm here to tell others that you can make it through with hard work, time and positivity."

The program has proved to be very successful and has expanded beyond stroke to include patients with other types of brain injuries and conditions.



Joy Phillips Murphy



Philip Austin

Quick, Specialized Treatment

Karen's stroke was not typical, in that she didn't have any of the major risk factors associated with the disease, although studies suggest that women who experience visual migraines have higher rates of ischemic strokes. It is also known that chocolate is a common trigger for migraines, but it is not known if this played a role in Karen's situation. She was also fortunate to have only had what are known as mini strokes. Had she had a more serious type of stroke, waiting to get treatment could have had devastating effects. One of the most effective treatments for certain types of stroke is a clot-busting drug called tPA, which must be administered within the first few hours of the onset of symptoms.

Regardless of what type of stroke a patient has, getting treated at a hospital with physicians and medical staff members who are specifically trained in stroke care provides the best outcome, both in the short term and the long term.

UNC Health Care takes a multidisciplinary approach to stroke treatment that includes everyone who sees the patient when he or she arrives in the Emergency Department to the neurologist and follow-up rehabilitation specialists.

"Being able to get treatment at the UNC Stroke Center made me realize how lucky I was," says Karen, recognizing the importance of having access to state-of-the-art imaging and testing.

Getting the Message Out

"In the days and months following my diagnosis, I became acutely aware of how little we know about stroke and what a need there was for more public recognition and education," says Karen.

Part of the problem with communicating the prevalence and devastation of stroke is that every case is different. While many people experience numbness on one side of the body and have to undergo extensive speech, occupational and physical therapy—some people, like Karen, experience no obvious symptoms and have no residual effects.

"The degree of disability has no bearing on the age of the patient or the size of the stroke," says Dr. Felix. "It has everything to do with the location of the stroke. The good news is that we see many patients who have no perceptible abnormalities unless you looked at a brain scan."

Karen uses her experience to help raise stroke awareness and is now a member of the Justus-Warren Heart Disease & Stroke Prevention Task Force and chair of the Stroke Advisory Council. She is working toward assisting multiple agencies to develop a stroke system of care, so that those who need quick treatment—such as the clot-busting drug tPA—have access to those resources.

"I have been stroke-free for seven years," says Karen, "and I believe the outstanding care I received at UNC Health Care put me on the path toward stopping any future events. All people should have access to services that can save them from stroke. That is my personal mission." ■

Dedicated Care Makes a Difference

A PHRASE HEARD frequently in relation to stroke is, “Time is brain,” meaning the longer it takes to treat the patient, the more potential damage that can be done to the brain. So getting to a hospital at the very first signs of a stroke is crucial.

At UNC Health Care, patients in the Emergency Department who are identified as possibly having a stroke are seen by a dedicated stroke team, which is specially trained in stroke care.

“Our first line of defense is the residents on call,” says Susan Wilson, RN, MSN, C-ANP, clinical assistant professor with the UNC Stroke Center. Then a medical team that includes a neurologist is alerted through an acute stroke paging system.

The Stroke Team is part of the UNC Stroke Center’s multidisciplinary program that incorporates state-of-the-art approaches in caring for patients with stroke or other cerebrovascular disorders.

“The Joint Commission mandates ongoing education for medical professionals who work in certified stroke centers,” says Wilson, who explains that the same rapid response care is provided to in-house patients by the Brain Attack Team. Along with a neurologist, a neuroscience ICU nurse responds to the bedside to assist.

The program has been certified by The Joint Commission and has earned



“We want people to know that when they come to UNC Health Care, they are receiving the best care as judged by nationwide criteria.” —David Y. Huang, MD, PhD, director, UNC Stroke Center

the Gold Seal of Approval, which assures patients, referring physicians and community members that an organization delivers quality care according to the safest standards available.

Offering patients a dedicated neuroscience ICU with 24/7 stroke care, as well as cutting-edge clinical trials,

UNC Health Care has invested significant resources to grow the Stroke Center into an exemplary model of next-generation stroke treatment. Patients also benefit from the continuity of care provided throughout the recovery process, which can be lengthy depending on the amount of rehabilitation that is required after the initial stroke.

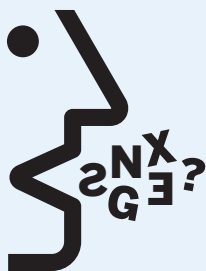
“We want people to know that when they come to UNC Health Care, they

are receiving the best care as judged by nationwide criteria,” says David Y. Huang, MD, PhD, director of the UNC Stroke Center. “We mean it when we say we are for leading, teaching and caring—and this shows in everything we do. We are a strong example of what an academic stroke center should be.”

Time Is Brain

**Know the signs of stroke so you can act quickly and prevent irreversible damage.
Call 911 if you experience any of the following symptoms:**

Sudden confusion
or difficulty
speaking or
understanding



Sudden numbness
or weakness of the
face, arm or leg—
especially on one
side of the body



Sudden severe
headache with no
obvious cause



Sudden difficulty
seeing in one or
both eyes



Sudden difficulty
walking, dizziness,
or loss of balance
or coordination



Source: American Stroke Association

Gluten-Free Diet

TIM FREER CONTRIBUTED TO THIS ARTICLE.

Not too many years ago, it was rare to hear that someone was eating a gluten-free diet. Now, it seems to be much more prevalent. So much so that grocery stores have entire aisles specifically for gluten-free foods, and restaurants are including gluten-free menus. This is more than a passing trend, however, or the latest weight-loss plan. Gluten-free diets are the only effective treatment for patients with celiac disease, and the number of diagnoses in patients is rising.

“We have seen a large increase in the number of celiac cases in the last five years,” says Steve Lichtman, MD, chief of Pediatric Gastroenterology at UNC Health Care, “and we don’t know exactly why.”

According to the Celiac Disease Foundation, approximately one in 133 Americans has celiac disease, and many of those cases are undiagnosed because of the variability of symptoms, which could have a number of causes.

Celiac disease, also known as celiac sprue or gluten intolerance, is a genetic, autoimmune disorder. Foods containing gluten cause the body’s immune system to respond by damaging the small intestine. Specifically, it causes the loss of villi, the tiny fingerlike protrusions that line the small intestine, according to the National Institute of Diabetes and Digestive and Kidney Diseases. As a result, the body is unable to absorb nutrients, and malnutrition can occur.



Gluten is found in many everyday foods, such as breads, cereals and pasta.

What Is Gluten?

For patients who have been diagnosed with celiac disease, it is critical that they follow a strictly gluten-free diet. It is a lifelong dietary lifestyle change and is the only way to prevent the damaging effects that gluten has on the body.

Gluten is common in foods, especially most pastas, grains and cereals and many processed foods.

“Gluten is found in products that contain rye, wheat and barley,” says Jennifer Wills-Gallagher, MPPA, RD, LDN, a dietitian at UNC Health Care. She warns that patients need to avoid items such as bread, pasta, cookies, cakes and pizza crust. Foods that are safe to eat include most meats, fruits and vegetables.

“It may be frustrating at first, but with a little homework people will find many items safe to eat,” Wills-Gallagher says. “Grains and starches considered safe include rice, corn, millet, buckwheat, quinoa, beans, flax, lentils, nuts, peas, potato, seeds and tapioca.”

Properly followed, the gluten-free diet will yield results almost immediately, with many patients noticing an improvement in symptoms within days. Within three to six months, the small intestine may be able to heal significantly, depending on the extent of the damage before diagnosis.

Even after you learn what foods are “safe,” Wills-Gallagher stresses the importance of always checking the ingredient list. “The FDA does not

regulate the use of 'gluten-free' on a label," she says. "The label must state if there is wheat as an ingredient, but there is no such regulation for rye or barley."

Also, gluten can be in some foods that most people wouldn't suspect. Any food with grain fillers and additives will likely have gluten, such as cold cuts and hot dogs, as well as french fries, soy and barbecue sauces, beer, and even communion wafers. Other nonfood items to consider are toothpastes, lipstick, medications, vitamins and supplements.

Diagnosis Is Key

One important consideration of celiac disease is not to assume you have it. While it was once difficult to get a definitive diagnosis, advances in the medical community's understanding of the disease have led to better diagnosis and treatment.

An initial blood test can determine if a patient has certain antibodies indicative of celiac disease. A positive result is then followed by an endoscopic small bowel biopsy, which is required to confirm the diagnosis and assess the degree of damage to the intestinal lining.

"A significant number of people believe they have celiac disease, but actually do not," says Maya Jerath, MD, PhD, director of UNC's Allergy and Immunology Clinic. People are experimenting more with gluten-free diets, but they have not been diagnosed with the disease.

"Just trying to see if you respond to a gluten-free diet is not a good idea," Dr. Lichtman says. "The diet is healthy and safe, but any amount of cheating or small errors will sabotage it. Skipping the endoscopy with biopsy, which will make a definitive diagnosis, is a mistake. If you really want to know, get a biopsy; this is a lifelong disease."

"When eating at restaurants, be aware that cross-contamination can occur when food is prepared using cooking equipment shared with gluten-containing foods."

—Jennifer Wills-Gallagher, MPPA, RD, LDN, dietitian, UNC Health Care



Wild Rice Spring Rolls

8 servings

Ingredients

1 tsp. vegetable oil
1 tsp. minced garlic
1 tsp. minced ginger
¼ c. chopped onion
¼ c. chopped green pepper
¼ c. frozen corn kernels, thawed
1 c. cooked wild rice
1 c. shredded cabbage
½ tsp. salt
¼ tsp. pepper
8 100 percent rice paper spring roll wrappers or 8 iceberg lettuce leaves

Directions

1. Heat the oil in a large skillet over medium heat. Add the garlic, ginger, onion and pepper. Sauté for 3 to 4 minutes.
2. Add the corn, rice, cabbage, salt and pepper. Cook for 3 to 4 more minutes, or until heated through.
3. Cover a baking sheet with parchment paper.
4. Dip a rice paper wrapper, one at a time, in hot water for a couple of seconds to soften. Place 2 tablespoons of the mixture in the center of the wrapper, fold in the sides, and roll them up. Place the rolls on the baking sheet. Repeat with the remaining wrappers.
5. Place the rolls in the refrigerator to cool for about 10 to 15 minutes, or until ready to serve.



Tip: Iceberg lettuce leaves work well in place of the spring roll wrappers. Just separate the large leaves from the outside of the lettuce, and serve the lettuce leaves with the filling on the side. Each diner will then roll at the table.

Nutritional Information (per serving)

78.8 calories, <1 g fat, 0 mg cholesterol, 152 mg sodium,

16.6 g carbohydrates, 1.5 g fiber, 1.8 g protein, 10.6 mg calcium, <1 mg iron.

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Try It! Then Tell Us



Visit our Facebook page and tell us about your experience making this recipe at home: www.facebook.com/unchealthcare.

CALENDAR

Health events, classes
and support groups
from UNC Health Care

Community Classes

Advanced registration is required for all of the following classes. You may register or view schedules online at www.nchealthywoman.org (click "Childbirth Classes/Tours") or call (919) 843-8463. We now offer a 30% UNC employee discount and a 60% Medicaid discount on most classes.

Prepared Childbirth

Classes focus on the normal birth process, with emphasis on how mother and partner can work together to have a healthy, positive experience. Call to register at 14 and 24 weeks pregnant. **\$85 per couple**

Sign Language for Budding Babies

This two-hour class introduces parents and parents-to-be to the benefits of using American Sign Language with preverbal infants. **\$10 per couple**

Photographing Your Baby

This two-hour seminar prepares parents and parents-to-be for capturing vibrant photos of the new baby. **\$10 per couple**

NEW! Spanish Classes and Tours

Prepared Childbirth, Breastfeeding, CPR and Maternity Tours are offered in Spanish. Registration for Spanish classes and tours can be made online in English at www.nchealthywoman.org or in Spanish by calling (919) 843-1759. Classes take place at the new El Centro Hispano at Carrboro Shopping Plaza.



Prenatal Yoga

The mindful practice of gentle yoga postures can help increase comfort for expectant moms. Mondays for five weeks. **\$50**

Breastfeeding

This 2½-hour class acquaints couples with the basics of breastfeeding. **\$25 per couple**

CPR for Family and Friends

This class teaches CPR techniques for infants, children and adults and provides information on injury prevention. **\$40 per couple**

4th Trimester: Life with a Newborn

This three-hour class helps prepare you for life with a newborn. One Saturday per month. **\$25 per couple**

Boot Camp for New Dads

First-time expectant fathers meet with "veteran" dads who bring their babies to class. One Saturday per month. **\$25 per dad**

Choosing and Using Child Care

Parents learn strategies for finding quality child care for infants, toddlers and school-age children. **FREE**

Baby in the Dog's House

This seminar teaches parents-to-be how to successfully prepare the family dog for the arrival of a new baby. **\$10 per couple**

Maternity Center Tours

Tours of the N.C. Women's Hospital Labor and Delivery and the Maternity Care Center are designed to answer your questions about the hospital and what to expect when you arrive to have your baby. **FREE**

Sibling Tours

Classes are geared toward children 3–8 years old so they can see where mommy is going to have the new baby. One Saturday per month. **FREE**

Mentoring Other Mothers (MOM)

This is a networking group designed for new mothers and their babies (birth to 4½ months) to share information with other mothers. Each group is facilitated by a trained educator. Call for times and locations. **\$3 per session, FREE if you have attended UNC Prepared Childbirth Class**

New Class! Refresher Childbirth Class

This class is designed for parents who have already had a child to review the current recommendations and trends. **\$40 per couple**

Wellness Center Classes

To register for Wellness Center classes, stop by the registration desk at the Wellness Center. For more information, call (919) 966-5500 or visit www.uncwellness.com.

Hearing Screening

The UNC Hearing and Communication Center is offering free hearing screenings for up to 24 people. This is open to UNC Wellness Center members, guests and the community. All interested participants must call the Hearing and Communication Center directly to schedule an appointment, and for a pre-screening to see if they qualify for the screening. **May 5, 9 a.m.–noon.**

2011 Women's Health Lecture May 16, 6:30–8 p.m.

Updates on Technology and Hearing Solutions

Learn about the latest updates in technology to improve and enhance your hearing and communication. A UNC Hearing and Communication Center faculty member, in the Division of Speech and Hearing Sciences at UNC Chapel Hill, will lead this program. **May 19, 12:30–1:30 p.m.**

Eat Well, Age Well

At every stage of women's lives, nutrition and regular exercise are the cornerstones of good health and optimal energy. In this program, Liz Watt, RD, will focus on specific nutritional needs for women as they age and how key nutrients can help

Weight-Loss Surgery Listening Sessions

**Tuesdays, 11:15 a.m.
Women's Health
Information Center**

Please join us for an information session to learn how weight-loss surgeries can help you or someone you care about. Tara Zychowicz, FNP, of UNC Health Care's Bariatric team provides details on the options for weight-loss surgery and on the benefits of UNC's personalized approach.

For more information, call **(919) 966-8436**.



fight off age-related diseases, maintain immune functioning and help optimize well-being in the latter stages of life. **May 20, 12:30–2 p.m.**

Medications & Senior Health

Dyana Morgan, a registered pharmacist, will discuss how to select a drug benefit plan and how to obtain and safely take medications, especially in light of health care reform. **May 23, 6:30–8 p.m.**

2011 Women's Health Lecture
May 25, 6:30–8 p.m.

The Magic of Illusion Dressing: Easy Tips for "Nonfat" Dressing

Bev Dwane, a certified image professional, will reveal the secrets of "illusion dressing." Learn easy, fun tips for selecting clothes that flatter your best features—and help you look 20 pounds lighter! **May 26, 6:30–8 p.m.**

Alzheimer's Myths and Facts

Lisa Gwyther, MSW, LCSW, will help differentiate between age-associated memory impairment and dementia because of a medical condition and will address common myths and misconceptions regarding dementia and Alzheimer's disease. **May 27, 12:30–1:30 p.m.**

Mind Power: The Art of Concentration

This workshop is for those who wish to increase their ability to focus in high-pressure performance situations and for those who wish to learn to focus the mind more clearly in everyday situations. Presented by Helen Spielman, an acclaimed performance anxiety coach. **June 7, 6:30–8 p.m.**

Women's Health lecture
June 15, 6:30–8 p.m.

Setting and Achieving Goals: Who Moved the Goal Posts?

Learn how to clarify your intentions, to set achievable and meaningful goals, and to find the motivation to keep you going through tough times. Presented by William Frey, co-owner of Pathfinders Coaching and Educational Services. **June 20, 6:30–8 p.m.**

Safe Sitter

This medically accurate, nationally recognized baby-sitting preparation program is designed for boys and girls ages 11 to 13. Sitters will learn how to handle specific ages, injury prevention techniques, care of the choking child, preventing problem behavior, and the business of baby-sitting. Only open to ages 11 to 13. **June 30, 9 a.m.–4 p.m. \$45 for members, \$55 for nonmembers**

Comprehensive Cancer Support Program

*These integrative medicine services and classes are held in Chapel Hill at Carolina Pointe II, 6011 Farrington Road, or at the N.C. Cancer Hospital's Patient and Family Resource Center. For more information and to register, call **(919) 966-3494**.*

Yoga

A welcoming class for people who are new to yoga or who want to increase their flexibility, strength and stamina. Whether you are in treatment, a caregiver or a cancer survivor, join us for an exploration of poses and breathing practices for stretching, strengthening and revitalizing the body while bringing calm to the mind and heart. Instructors: Doreen Stein-Seroussi and Lynne Jaffe. **Mondays and Thursdays, 11 a.m.–12:30 p.m.**

Massage for Cancer Patients and Family

A professional massage therapist with specialized training works with people confronting cancer. Call to schedule an appointment.

Lymphedema Precautions and Prevention

This class is designed for patients at risk for lymphedema following cancer surgery involving lymph node dissection. **Monthly on the first Wednesday, 1–2 p.m.**

Look Good, Feel Better

Teaches beauty techniques to female cancer patients in active treatment to help them combat the appearance-related effects of cancer treatment. Registration required. Call Pam Baker at **(919) 843-0680**. **Monthly on the third Monday, 10 a.m.–noon**

Relaxation Room, Spa Pod

A warm, soothing bed that gently loosens tension through a computerized massage bed enhances your ability to deal with stress and tension. Call Pam Baker at **(919) 843-0680**.

Support Groups

Support groups assist patients and family members dealing with a variety of diseases and disorders. For information on where and when the groups meet, contact the person listed below.

Bariatric Surgery
Tara Zychowicz, FNP
tarazych@med.unc.edu

Caregivers of Cancer Patients
Liz Sherwood
(919) 966-3494

Getting Your Bearings
Cornucopia Cancer Support Center
(919) 401-9333

Grief
UNC Hospice Office, Pittsboro
Ann Ritter
(919) 542-5545

Grief Recovery Group
UNC Hospitals Bereavement Support Services
Heidi Gessner
(919) 966-0716

Infertility—RESOLVE Support Group
Terry Pell
(919) 631-3697

Living with Metastatic/Advanced Cancer
(919) 401-9333

Prostate Support & Education Group
(919) 965-4025

Sanford Center (cancer)
Enrichment Center, Sanford
(919) 776-0501

Sarcoidosis
(919) 966-2531

Stroke
Stephanie McAdams
(919) 966-9493

Support for People with Oral, Head and Neck Cancer (SPOHNC)
(919) 401-9333

Triangle Bladder Cancer Support Group
6011 Farrington Road
Liz Sherwood
(919) 843-5069

UNC Neurology Sleep Support Group
Jeanette Wedsworth
(919) 966-5500

UNC Nicotine Dependence Program
(919) 843-1521

Allergy and Immunology - Nortin M. Hadler, David B. Peden **Anesthesiology** - David C. Mayer, Anthony N. Passannante, David A. Zvara **Cardiovascular Disease** - Kirkwood Adams, Anil Gehi, Jeffrey Lawrence Klein, John Paul Mounsey, Marschall S. Runge, Sidney C. Smith Jr., David Tate, Park W. Willis IV **Colon and Rectal Surgery** - Mark J. Koruda **Critical Care Medicine** - Philip Boysen, Shannon Carson, David C. Henke, James R. Yankaskas **Dermatology** - Sue Ellen Cox, Luis A. Diaz, Stanley B. Levy, David Scott Rubenstein, Nancy E. Thomas **Endocrinology and Metabolism** - John B. Buse, David Clemmons, Jean Dostou, Deepa Kirk, Thomas L. O'Connell, Janet Rubin, Julie L. Sharpless **Family Medicine** - Timothy P. Daaleman, Allen J. Daugird, Clark R. Denniston, Jeffrey Furman, Robert Gianforcaro, Margaret Gourlay, G. Patrick Guiteras, Andrew Hannapel, Margaret Helton, James P. Manor, Warren P. Newton, Susan F. Slatkoff, Donald Spencer, Beat D. Steiner, Anthony J. Viera, Samuel S. Weir, Adam J. Zolotor **Gastroenterology** - Eugene M. Bozynski, Evan S. Dellon, Douglas A. Drossman, Ian S. Grimm, Hans Herfarth, Kim L. Isaacs, Roy C. Orlando, Scott E. Plevy, Robert Sandler, R. Balfour Sartor, Nicholas J. Shaheen **Geriatric Medicine** - Jan Busby-Whitehead, Holly Jean Coward, M. Andrew Greganti, Laura C. Hanson, John S. Kizer, Philip D. Sloane **Hand Surgery** - Donald K. Bynum Jr. **Hepatology** - Jama Darling, Michael Warren Fried, Paul H. Hayashi, Steven Zacks **Infectious Disease** - Myron Cohen, Joseph J. Eron Jr., P. Frederick Sparling, Charles M. van der Horst **Internal Medicine** - Marco A. Aleman, Timothy Carey, Paul R. Michael Pignone, Amy W. Shaheen **Medical Oncology and Hematology** - Richard M. Goldberg, Nigel S. Key, Stephan Rathmell, Thomas C. Shea, Mark A. Socinski Detwiler, Ronald J. Falk, Maria E. Ferris, Gerald **Surgery** - Matthew G. Ewend **Neurology** - Kaufer, Caroline M. Klein, J. Douglas Mann, **Medicine** - William H. McCartney **Obstetrics** - Boggess, Wendy R. Brewster, Nancy C. C. Fowler Jr., Marc A. Fritz, Paola Alvarez Grimes, Catherine Matthews, M. Kathryn Robert Strauss, John M. Thorp Jr., Linda Van Le, L. Cohen, Jonathan J. Dutton, W. Craig Fowler, Laurence E. Dahners, Douglas R. Dirschl, **Otolaryngology** - Oliver F. Adunka, Craig Senior, William W. Shockley, Mark C. Weissler Charles Jennette **Pediatrics** - Wallace Brown, Kylastra, Jennifer L. Lail, Jacob A. Lohr, Kathy A. Merritt, Eliana M. Perrin, Kathleen Salter, Michael J. Steiner **Pediatric Specialist** - William T. Adamson, Joshua J. Alexander, Arthur Aylsworth, Ann G. Bailey, Thomas H. Belhorn, Molly Berkoff, Julie Blatt, Carl Bose, Timothy P. Bukowski, Ali S. Calikoglu, Edmund R. Campion, Marsha Davenport, Stephanie D. Davis, A. Joseph D'Ercole, Amelia F. Drake, Maria E. Ferris, Katherine Freeman, Stuart Gold, Robert S. Greenwood, Frederick W. Henderson, Marianna M. Henry, James J. Jenson, Patricia Lange, Margaret W. Leigh, Steven N. Lichtman, Erin Malloy, Kenya McNeal-Trice, Michael R. Mill, Marianne Muhlebach, Albert Jackson Nafel, Terry L. Noah, Elisabeth S. Potts Dellon, Joseph Piven, William Primack, George Retsch-Bogart, Desmond K. Runyan, Linmarie Sikich, Michael Simmons, Leonard Stein, Alan D. Stiles, Richard W. Sutherland, Michael B. Tennison, Landrum S. Tucker Jr., Amy M. Ursano, Lynn Wegner, Spencer G. Weig, Carlton Zdanski **Physical Medicine and Rehabilitation** - Michael Y. Lee **Psychiatry** - L. Jarrett Barnhill, Robert A. Bashford, Alan Beeber, James Cameron Garbutt, Bradley Gaynes, David S. Janowsky, Lida Jeck, Julia S. Knerr, Maria C. La Via, B. Anthony Lindsey, Samantha E. Meltzer-Brody, Diana O. Perkins, Joseph Piven, David R. Rubinow, Linmarie Sikich, Landrum S. Tucker Jr., Richard H. Weisler **Pulmonary Medicine** - Raymond D. Coakley, James F. Donohue, David C. Henke, Michael R. Knowles, M. Patricia Rivera, Peadar Noone, James R. Yankaskas **Radiation Oncology** - Catherine Lee, Lawrence B. Marks, Julian G. Rosenman, Joel E. Tepper, Mahesh A. Varia **Radiology** - Mauricio Castillio, Julia Fielding, Joseph K. T. Lee, Joseph M. Stavas **Rheumatology** - MaryAnne Dooley, Nortin M. Hadler, Joanne Jordan **Sleep Medicine** - Bradley Vaughn **Surgery** - David A. Gerber, Anthony A. Meyer **Surgical Oncology** - Benjamin F. Calvo, David W. Ollila **Thoracic Surgery** - Richard H. Feins, Michael R. Mill **Urology** - Culley C. Carson III, Raj Pruthi, Eric Wallen **Vascular Surgery** - Mark Farber



At UNC Health Care, our commitment to caring continues to reach new heights. In fact, a record number of our doctors were recently named as The Best Doctors in America® – a list representing the nation's most respected specialists and outstanding primary care physicians. This prestigious roll call represents the top 5% of doctors in the U.S. More important, it is a shining example of these physicians' unprecedented commitment to providing the best health care for the people of North Carolina.

For more information on these and other UNC Health Care physicians visit findadoc.unchealthcare.org